## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

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CLAIMS AS FILED - PART I								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
(Column 1) (Column 2)							1 1		<u> </u>	7 7	SMALL	ENIIIY	
U.S	. NATIONAL	STAGE FEES						RATE	FEE	j	RATE	FEE	
BAS	SIC FEE		SMALL ENT.	=\$ 150	LAR	GE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300	
EXA	MINATION FE	E	Satisfies PCT Ar (4) = \$50	<b>/ \$ 100</b>		ther situations = \$ 100 / \$ 200		EXAM. FEE			EXAM. FEE	200	
SEA	ARCH FEE	•	U.S. is ISA = \$50/\$100  ALL other countries = \$200/\$400			ther situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	400	
FEE	FOR EXTRA	SPEC. PGS.	minus 100 =			/ 50 =		X \$ 125 =		·	X \$ 250 =	_	
τοτ	AL CHARGEA	BLE CLAIMS	9 min	us 20 =				X \$ 25 =		OR	X \$ 50 =	-	
INDI	EPENDENT CL	AIMS	/ mi	inus 3 =		<u> </u>		X \$ 100 =		OR	X \$ 200 =		
MUL	TIPLE DEPEN	DENT CLAIM PR	ESENT					+ \$ 180 =		OR	+ \$ 360 =	_	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	900		
CLAIMS AS AMENDED - PART II  5-6-05 (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID I	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONÁL FEE	
	Total	• 19	Minus	<b>"</b> 2	$\mathcal{O}_{-}$	= <del></del>		X \$ 25 =		OR	X \$ 50 =	<u> </u>	
	Independent	• 3	Minus	``) •	3	, <u> </u>		X \$ 100 =		OR	X \$ 200 =	)	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	1	
								TOTAL ADDIT. FEE	•	OR	TOTAL ADDIT.		
an	nima anti	8 (C-1 4)		<b>(0</b> -2)	<b></b>	(Oakuma 2)							
2		CLAIMS REMAINING AFTER AMENDMENT	·	(Colum HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	-2	$\overline{\mathcal{D}}$	=	ſ	X \$ 25 =		OR	X \$ 50 =		
	independent	•	Minus	••• 🦪	3	=	Ī	X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI				LAIM			+ \$ 180 =		OR	+ \$ 360 =		
								OTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
								,			,		
		mn 1 is less than the mber Previously Pai											
***	If the "Highest Nu	mber Previously Paid	d For in this SPA	ACE is less	than '3',	enter "3".	in the	appropriate box	in column 1				